Case 8:00-bk-12295-RK Doc 487-3 Filed 05/27/09 Entered 05/27/09 10:55:25 Desc Exhibit Exhibit 10-14 Page 1 of 52

UNCESSESS AND SUBMINARY PROPERTY OF AND	1.05/27/09 Entered 05 /27/09 -	1 0:55:25 Deser 10:4
Name of Deptor Exhibit Exhibit		PROOF OF CLAIM
DFJ ITALIA, LTD.	SA 00-12295 JR	
NOTE: This form should not be used to make a claim for an administrative case. A request for payment of an administrative expense may be fired on	expense arising after the commence	Do as
The state of the s	ursuant to 11 U.S.C. 4 503	0000
Name of Creditor (The person or other antiques		-
owes money or property): 10 ms IAn Thomas	anyone else has filed a proof of	d.
	claim relating to your claim. Attach	RA
vame and address where notices should be sent:	copy of statement giving particulars	
1478 Rockwell Rd	Check box if you have never received any notices from the	ł
Abengton, PA 19001	bankruotcy court in this case.	ļ
g.a., 177 / 100/	(12)	
elephone number 1115 mm 7 miles	Check box if the address differs from the address on the envelope	
elephone number: 215-572-8481	sent to you by the court.	THIS SPACE IS FOR COURT USE DNLY
scount or other number by which creditor identifies debtor:		TO THE STORY COURT OF BAILY
10000697	Check nere (eplaces	
The state of the s	amends a pre	Miously filed claim, dated
Basis for Claim		
Goods sold	Retiree benefits as defined in 1	1 U.S.C. § 1114 (a)
Services performed	wages, salaries, and compensa	tions (Fill out below)
Money loaned	Your SS #:	 ,
Personal in jury/wrongful death Taxes	Unpaid compensation for servic	99 performed
Dother Muratment	from	to
THE	(date)	(date)
Date debt was incurred:	2 4	•
819199	3. If court judgment, date obt.	ained:
Total Amount of Claim at Time Case Filed:	\$ _21,400	
If all or part of your claim is secured or entitled to priority, Check this box if claim includes interest or extraction.		
Check this box if claim includes interest or other charges of all interest or additional charges.	in addition to the principal amount of the	Claim Attach Homes
Secured Claim.		
-	8. Unsecured Priority Claim.	
Check this box if your claim is secured by collateral (including a right of setoff).	Check this box if you have an unsecure Amount entitled to priority \$	d Dhority claim
Brief Description of Collateral:	Amount entitled to priority \$ 3/	900
Real Estate Motor Vehicle	Wages, salaries, or commissions (up to	
Other	Wages, salaries, or commissions (up to 3 filing of the bankruptcy petition or cessar is earlier - 11 U.S.C. 4 507(a)(2)	(4,300), seamed within 90 days before
Value of Collateral: \$	Contributions to an employee benefit plan Up to \$1,950* of deposits toward purcha	1-11 U.S.C. \$507(a)(4).
	B VI NOUSIANO	[/] [P
N 01 2022	Alimony, maintenance, or support owed to 11 U.S.C. \$507(a)(7).	a spouse, former spouse, or child -
nt of arrearage and other charges at time case filed included in ed claim, if any \$	Taxes or penalties owed to governmental	Units . 11 II S & Sens /
od Gidnit, it arry 3	Amount appears applicable paragraph of 11	U.S.C. 4 507/a) /
	(Bancot In account	76
Credits: The amount of all payments on this claim has been the purpose of making this proof of claim.	A credited and deducted to-	sate of adjustment.
the purpose of making this proof of claim.	A	THIS SPACE IS FOR COURT USE ONLY
Supporting Documents: Attach copies of supporting documents, purchase orders invoices itemized statements.	uments, such as promissory	HAIN!
		J. J
The control of the co		
DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not a explain. If the documents are voluminous, attach a summary.	ivailable,	LOSINT
Jate-Stamped Copy: To receive an acknowledge		11'0100
enclose a stamped, self-addressed envelope and copy of this	the filing of your claim,	1/2×2
sign and point the name and title, if any, of the creditor or this claim (attach copy of power of attorney, if any):	proof of claim.	1
this claim (attach copy of power of attorney, if any):	other person authorized to file	
Penalty for presenting traudulent claim: Fine of up to \$500,000	O or imprisonment for up to 5	
	o o migrisorment for up to 5 years, or both. 18 U.S.C.	# 152 and 3521
:	EXELECT 1	TACUL

If you hold a claim against the Debtor as of March 20, 2000, you must fill out the attached Proof of Claim form in order for the Trustee to recognize your claim. The following supplemental information request does not replace the Proof of Claim form. The following information is being requested by the Trustee to supplement the Debtor's records and bank documentation. This information will assist the Trustee in the evaluation of the accuracy and completeness of the Debtor's records and in the processing of claims. If you did not invest in investment programs of the Debtor, you do not need to complete this form.

ACCOUNT HOLDER NA	ME <u>reme</u>	o Jan	1 homão		
	Investment 1	Investment 2	Investment 3	Investment 4	Investment 5
INVESTMENT OR LOAN	<u>S</u>				
1 Amount Invested	\$20,000	\$	\$	\$	\$
2 Date Invested	8/9/99				
Investment form (cash, check, wire, etc)	check				
Payee - Who was check payable to?	DFS Dalia				
Source of Funds (IRA, Pension, 401K, etc)	Calloro Fin	D			
6 Principal repaid	8		-		
7 Investment Program (Finivest, Diamond, etc)	Finivet				
DIVIDENDS and/or INTE	REST				
Total Dividends or Interest	received			s 1600	
How were the Dividends or	Interest payments	made? (check, ca	ash, wire)	<u> </u>	<u></u>
Frequency of Dividends or	Interest payments	(monthly, qtrly, etc)	•	month	lly
Were Dividends or Interest	payments added to	your principal rath	ner than paid?	addec	1 to
OTHER				Pa	enciple M
DFJ sales representative	÷			GUUSCALA	ell
What rate of Interest or retu	ırn was promised?			124'	%
Did you receive DFJ Accou	int Ledgers or state	ments?		(YES) NO)
SUPPORTING DOCUMEN	ITS				

Please attach copies of supporting documents, such as loan agreements, account ledger statements, correspondence, etc.

Do not send originals. If you have previously sent your supporting documents to the Trustee, please disregard.

EXHIBIT 10 PAGE 131

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Account Num 10000697

SSN/Tax ID

10/17/99

Page

1

Account Address

Phone

Thomas, James lan 25885 Trabuco Rd. #185

Lake Forest, CA 92630

(949) 586-1147

US

Statement Period:

From 09/16/99 Thru 10/15/99

Account Type 001

Account Rep 003

Beginning Balance

\$20,000.00

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-2834	10/15/99	001	Dividend Earnings		400.00
DFJ-2834	10/15/99	004	Dividend Payout	400.00	
			Total Activity	400.00	400.00

Account Num 10000697

SSN/Tax ID

02/17/00

Account **Address**

Phone

Thomas, James lan

25885 Trabuco Rd. #185

Lake Forest, CA 92630

US

Page

Statement Period:

From 01/16/00

Thru 02/15/00

Account Type 001

(949) 586-1147

Account Rep 003

Beginning Balance

\$20,000.00

Reference Code Date Category **Transaction Description Debits** Credits DFJ-3294 02/15/00 001 Dividend Earnings 400.00 DFJ-3294 02/15/00 004 Dividend Payout 400.00 **Total Activity** 400.00 400.00

ilsit Exhibit 10-14 Page 6 of 52

H I Italia, Ltd.

Account Num 10000697

SSN/Tax ID

11/17/99

Page

1

Account Address

Phone

Thomas, James Ian 25885 Trabuco Rd. #185

Lake Forest, CA 92630

(949) 586-1147

US

Statement Period:

From 10/16/99 Thru 11/15/99

Account Type 001

Account Rep 003

Beginning Balance

\$20,000.00

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-2948	11/15/99	001	Dividend Earnings		400.00
DFJ-2948	11/15/99	004	Dividend Payout	400.00	
			Total Activity	400.00	400.00

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Account Number 10000697

SSN/Tax ID

Statement Date: 08/12/99

Page 1

Account Holder Thomas, James Ian

Address

25885 Trabuco Rd. #185 Lake Forest, CA 92630

US

Phone

(949) 586-1147

Account Type Finivest

Account Rep Guy F. Scarpelli

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-25735	08/09/99	•	Initial Deposit		20,000.00
			Total Activity	0.00	20,000.00

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Italia, Ltd.

Account Num 10000697

SSN/Tax ID

08/18/99

Thomas, James lan

Page

Account Address

25885 Trabuco Rd. #185

Statement Period:

Lake Forest, CA 92630

From 07/16/99 Thru 08/15/99

US

Account Type 001

Beginning Balance

Phone (949) 586-1147

Account Rep 003

\$0.00

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-2573	08/09/99	*	Initial Deposit		20,000.00
			Total Activity	0.00	20,000.00

Finivest Bridge Funding Investment/Loan Agreement

James.	DFJ the "Marrag	g Director" hereinafter referred to as "MD," of the Finivest Bridge Fund, and the "Bridge Associate," hereinafter referred to as "BA," agree:
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That "MD" solely owns and controls one hundred percent of all outstanding shares in the Finivest Bridge Fund; and

That "BA" acknowledges and ratifies that he/she, by way of its investment, holds no shares, stocks, partnership shares (general or limited) in neither DFJ, Finivest, LTD, Finivest Bridge Fund, nor any of their subsidiaries.

ALSO, the "BA" shall have no right at any time to audit the books and records of the "MD," its subsidiaries, holding, officers and employees; nor shall the "BA," his/her agent(s), representative(s) have any voice in the day-to-day operations of either Finivest Bridge Fund, or the "MD."

Fridge Fund Depositor, or Bridge Associate.

herein: shall be admitted as a Depositor upon the terms and conditions set forth

The "BA" shall place on deposit with the Managing Director, DFJ, the sum of 20,000 \$US for a period of eighteen months, during which the "BA" agrees not to withdraw any portion of the principle. Upon completion of the initial term of the investment/loan agreement, it shall be automatically renewed at a guaranteed 24% annual interest rate for another eighteen-month period unless the "BA" notifies the "MD" in writing that he/she desires to terminate his/her investment/loan agreement.

Except for the initial eighteen-month period, the "BA" may choose to terminate, in writing, his/her contract at any time for any reason. Upon receipt of written notifications of termination of his/her investment/loan agreement, the "MD" shall deliver to the "BA" his/her principle deposit plus accrued interest within 14 days of said notice.

If the "BA" chooses to terminate the contract prior to the initial 18 month agreement, the "MD" shall deliver the principle investment minus all interest paid to "BA" within 14 days of said notice.

Upon Death, incapacity, or legal disability of the "BA," the "MD" shall contact said beneficiary and offer the option of returning said principle and accrued interest within 14 days or leaving said contract in place and allow the beneficiary to assume said contract and receive all interest payments from that day forward.

The "MD" shall pay a guaranteed annual interest rate of 24% on the principal deposit.

Interest payments on the principal deposit shall be paid monthly at the rate of 2% per month based on the initial investment deposit amount in \$US.

The "BA" understands that Finivest Bridge Fund is a DFJ offshore investment vehicle and is not responsible to report to the United States Government any earnings, dividends or interest payments made to its Investment/Loan Depositors (BA).

Emilia 10 PAGE 137

It is the Depositors responsibility to report all earnings to the United States Government and pay the appropriate taxes.

The "BA" agrees to indemnify and hold harmless the Finivest Bridge Fund, DFJ, its subsidiaries, holding, officers and employees in the event of any legal action taken by the United States Government and its agencies for nonpayment of taxes. Finivest Bridge Fund Bank is backed and guaranteed by DFJ Italia, LTD.

I would like my monthly interest payments in the form of (select one):

Check

- Wire Transfer into my personal account
- Direct deposit to offshore account

Roll Over

Make checks payable to DFJ

Duidends ligas on Sept. a	1814, 1999
at 400:00 pumonts	

Depositor name an	id address:
Name	Patrixin AKEN
Street Address	25825 Maycond #185
City/State/Zip code	14/6 7 4/1 84 67/
Telephone	12 149 586-1147
E-Mail/Fax	(111) 080-1/41/
DOB:	Soc. Sec. # Drivers Lic. #
Beneficiary name a	nd address:
Name	GONT TODEPH THOMAS (BOTHER)
Street Address	Sall Collect Collect
City/State/Zip code	
Telephone	
E-Mail/Fax	
DOB:	Soc. Sec. # Drivers Lic. #
OFJ Representative:	
Name	Guy F. Scarpelli
Street Address	18881 Von Karman Ave. Suite 220
City/State/Zip code	Irvine, CA. 92612
Telephone	949-955-2490 x 206
E-Mail/Fax	Guy@DFJItalia.com / 949-955-2497

Signature of Depositor

Representative:

Gy J. Scarpelli 18881 Von Karman Ave. Suite 220

Irvine, CA. 92612 949-955-2490 Ext. 206

Bearing D

PAGE 138

Bank of America State Bank A BankAmerica Company 19000 MacArthur Boulevard, Penthouse, P.O. Box 7640, Newport Beach, CA 92658-7640 SALOMONSMITHBARNEY XACTLYZOTHOUSAND DOLLARS NO CENTS "EPPP1519200" DFJ ITALIA 73 136m00 18 7n 66/60/80 Two Signatures 561 09218 ****20,000 Account Number VOID AFTER 180 DAYS FROM ISSUANCE 0561 Reqdired If Over \$25,000.00 ω 59995 90-4182 1211

Case 8:00-bk-12295-RK Doc 487-3 Filed 05/27/09 Entered 05/27/09 10:55:25 Desc , Exhibit Exhibit 10-14 Page 12 of 52

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If you hold a claim against the Debtor as of March 20, 2000, you must fill out the attached Proof of Claim form in order for the Trustee to recognize your claim. The following supplemental information request does not replace the Proof of Claim form. The following information is being requested by the Trustee to supplement the Debtor's records and bank documentation. This information will assist the Trustee in the evaluation of the accuracy and completeness of the Debtor's records and in the processing of claims. If you did not invest in investment programs of the Debtor, you do not need to complete this form.

	Investment 1	Investment 2	Investment 3	Investment 4	Investment 5
VESTMENT OR LOAD	is		·		
Amount Invested	: 50 000 .co	\$	\$	5	\$
Date Invested	12/9/98				
Investment form (cash, check, wire, etc)	Check				
Payee - Who was check payeble to?	DFJ				
Source of Funds (IRA, Pension, 401K, etc)	Mutual Evalor Ast				
Principal repaid	-0-				
Investment Progrem (Finivest, Diamond, etc)	Finivest				
VIDENDS and/or INTE	RESI				
Total Dividends or Interes	t received		:	; 19 3 (35000
	or Interest payments	mede? (check, ti	sah, wire)	CASH	3500 °C / CHECK
How were the Dividends of					
	r Interest paymenta (monthly, qirly, etc)	· ·		
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Please attach copies of supporting documents, such as loan agreements, account ledger statements, correspondence, etc. Do not send originals. If you have previously sent your supporting documents to the Trustee, please disregard.

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Case 8:00-blt-12295-RK Doc 487-3 Filed 05/27/09 Entered 05/27/09 10:55:25 Desc Exhibit Exhibit 10-14 Page 15 of 52 ALBERT, WEILAND & GOLDEN, LLP 1 Theodor C. Albert #81449 Steven J. Katzman #132755 2 Saar Swartzon #198732 650 Town Center Drive, Suite 1350 3 Costa Mesa, California 92626 Telephone: (714) 966-1000 Facsimile: (714) 956-1002 5 Special Counsel for Thomas H. Casey, 6 Chapter 7 Trustee 7 8 UNITED STATES BANKRUPTCY COURT 9 CENTRAL DISTRICT OF CALIFORNIA 10 SANTA ANA DIVISION 111 In ra Case No. SA 00-12295 JR DFJ ITALIA, LTD., Chapter 7 Case 13 NOTICE OF LAST DATE TO FILE PROOFS OF CLAIM 14 [Federal Rule of Bankruptcy 15 Procedure 3003(c)(3)] Debtor. 16 (Mc Mearing Required) 17 18 TO ALE CREDITORS AND PARTIES INTEREST: 1.5 20 PUBLISH TARE MUTICE that the United States Bankruptcy Court has fixed December 31, 2000 as the last date by which creditors in the case of DFJ ITALIA, LTD., ("Debtor") may file proofs of claim. 22 23 If you believe you are owed a debt by the Debtor, you must file a proof of claim in order to share in a distribution of 24 estate assets. If you do not timely file a proof of claim, your 25 claim against the estate will be barred and you will not participate in any distribution to be paid to creditors from estate funds in this case. mmy/cas01/0035/20tica.clas 1 NOTICE

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PLEASE TAKE FURTHER NOTICE that if your claim is based on any writing, you must attach copies of any and all such writings to the proof of claim or provide an adequate explanation of your inability to do so. Finiture to do so will render your claim subject to objection and possible disallowance.

PLEASE TAKE FURTHER NOTICE that in addition to filing your proof of claim with the Ronald Reagan Federal Building, located at 411 West Fourth Strong, Santa Ana, California 92712, you must mail a copy of the complete proof of claim to general sourcel to the Trustat, Sames Joseph, of counsel to Earning, Gill, Diamond & Kolitz, LLP, 2029 Century Park E., 31d, Floor, Los Angeles, California, 90067-1904.

For your commensiones, a proof of claim form is emclosed.

DATED: October 31, 2000

ALBERT, WETLAND & GOLDEN

By:

JERVERY COLDEN

Special Counsel for Thomas H. Casey, Chapter 7 Trustee

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NOTICE

Enemoit 11 Inch 143

12/26/00

United States Bankruptcy Central District Of California Santa Ana Division

Ronald Reagan Federal Building 411 West Fourth Street Santa Ana, California, 92712

Re: DFJ Italia, Ltd. Care # SA 00-12295 Proof of Claim

To Whom It May Concern:

I. Donald Rippy Proctor Jr., am aware that Leon F. Brady Jr., is in the process of filing a proof of claim. He is my father-in-law. Our investments were entered separately, just with this same firm of Robert Caron.

And Associates, Attorneys At Law, in Oxnard Ca. I, myself, never received any paperwork from anyone, to file this proof of claim. I had to obtain it from my father-in-law. If you have any questions, please contact me at 205-410-3634 or 205-410-2222.

Sincerely,

Donald R Proctor Tr

Cc: James Joseph, Danning, Gill, Diamond & Kolitz, LLP

EXHIBIT II PAGE 144

Itemization Donald R. Proctor

DFJ Italia Investment
Initial Investment-\$50,000,00
Received interest payments from 1/99 to 1/2000 of \$1000 00 a month.
Beginning 2/2000 received 1 interest payment in the amount of \$500.00.
Due to datg in interest payments not received on initial investment \$10,500.00.

Total principal due from finivest contract \$50,000.00. Total interest not paid on investment to date \$10,500.00.

Total debt owed to Donald R. Proctor on investment contract \$60,500.00

Desc

DFJ the "Managing Director," hereinafter referred to as "MD," of the Finivest Bridge Fund, and Douald Proctor, the "Bridge Associate," hereinafter referred to as "BA," agree:

That "MD" solely owns and controls one hundred percent of all outstanding shares in the Finivest Bridge Fund; and

That "BA" acknowledges and ratifies that he/she, by way of investment/loan agreement, holds no shares, stocks, partnership shares (general or limited) in neither DFJ, Finivest, LTD, the Finivest Bridge Fund, nor any of their subsidiaries; and,

FURTHERMORE, the "BA" will indemnify the "MD," its subsidiaries, holding, officers and employees for any claim or liability arising out of their activities on behalf of the FUND unless such claim or liability was the result of negligence or misconduct.

ALSO, the "BA" shall have no right at any time to audit the books and records of the "MD," its subsidiaries, holding officers and employees; nor shall the "BA," his/her agent(s), and/or representative(s) have any voice in the day-to-day operations of either the FUND or the "MD."

Donald Proctor's sole relationship to the FUND and "MD" is best described as a Bridge Fund Depositor, or Bridge Associate.

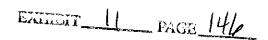
Donald Proctor shall be admitted as a Bridge Associate upon the terms and conditions set forth herein:

The "BA" shall place on deposit with the Managing Director, DFJ, the sum of Fifty Thousand and No Cents, in U.S. Funds (\$50,000.00) for a period of eighteen months, during which the "BA" agrees not to withdraw any portion of the principal. Upon completion of the initial term of the investment/loan agreement, it shall be automatically renewed for every 18 months for another eighteen month period, unless the "BA" notifies the "MD" in writing that he/she desires to terminate his/her investment/loan agreement.

Except for the initial eighteen-month period, the "BA" may choose to terminate, in writing, his/her contract at any time for any reason. Upon receipt of written notification of termination of his/her investment/loan agreement, the "MD" shall deliver to the "BA" his/her principal deposit plus accrued interest within 14 days of said notice.

Upon the death, incapacity, or legal disability of the "BA," the "MD" shall return his/her principal deposit plus accrued interest within 14 days, to the herein designated

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beneficiary of the "BA", such Designated Beneficiary being As stated in will (Executor)
The "BA" shall provide the "MD" with a valid picture ID, the SS#, and any other such
documentation so as to properly identify the above named designated beneficiary.

The "MD" shall pay a Guaranteed annual interest rate of 24% on the principal deposit.

Interest payments on the principal deposit shall be paid monthly at the rate of 2% per month, based on the initial investment/loan deposit in SUS.

The "BA" understands that the FINIVEST BRIDGE FUND is a DFJ offshore investment vehicle, and as such is not responsible to report to the United States Government any earnings, dividends or interest payments made to ins Investment/Loan Depositors (BA).

It is the Bridge Associates responsibility to report all earning to the United States Government and pay the appropriate taxes.

The "BA" agrees to indemnify and hold harmless the Finivest Bridge Fund, DFJ. Its subsidiaries, holding, officers and employees in the event of any legal action taken by the United States Government and its agencies for non-payment of taxes. This Finivest bridge fund is backed and guaranteed by DFJ Italia, Ltd.

I would like my monthly interest payments in the form of (select one):

Check

- ☐ Wire Transfer into my personal account
- Direct deposit to offshore account
- □ Roll Over

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Make checks payable to DFJ

Bridge Associates name and address:

Name	Donald Proctor
Address	P.O. Box 381074
City/State/zip code	Birmingham, AL, 35238
Telephone	(205) 368-5443
E-mail / fax	(205) 408-7492.

DOB: 6/5/61 Soc. Sec.# 421-92-5391 Drivers Lic.# 4725 776

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Ken Kuçzway	
	EARLEST 147

Name	Ken Kuczway
Address	18831 Von Kamen Suite 220
City/State/zip code	Irvine CA. 9261292715
Telephone	(714)955-2490 ext.205
E-mail / fax	(714)955-2497

Agreed to and signed this Date:

Donald Proctor Bridge Associate DFJ Representative

Ken Kuczway, DFJ.

18881 Von Karmen Ave. Ste 220

Irvine, CA. 92612 714-955-2490

Ext 205

This Guaranty Agreement ("Guaranty") is made effective as of December 4, 1998, by Robert Troy Caron ("Guarantor"), and this Guaranty is being given to Donald Proctor ("Investor"), for his further security interest in placing his money for investment with DFJ Italia Bridge Fund.

- OBLIGATIONS. This Guaranty is given by the Guarantor to Investor to independently secure I. his \$100,000.00 (one hundred thousand dollar) investment with DFJ Italia, and in consideration of the Investor placing these funds with DFI Italia Bridge Fund, and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, and further acknowledging that the Investor intends to rely on this Guaranty, the Guarantor absolutely and unconditionally guarantees prompt payment when due of all interest and principal of the DFJ Italia investment.
- Ш. LIMITATION OF AMOUNT. The liability of the Guarantor pursuant to this Guaranty shall not, at any time, exceed the sum of \$100,000.00, plus 24% of any unpaid interest
- III. DURATION. This is a continuing Guaranty and shall not be revoked by the Guarantor. This Guaranty will remain effective until all obligations of DFJ Italia guaranteed by this Guaranty are completely discharged, including principal and all interest.
- IV. NOTICE OF DEFAULT. The Investor shall be required to notify the Guarantor of any default before proceeding against the Guarantor under this Guaranty. The Guarantor agrees to cure any default within 10 days of notice.
- V. INVESTOR PROVISIONS. The Guarantor expressly waives diligence on the part of the Investor in collection of any part of the debt or other obligation owed by DFJ Italia. Further, the Creditor has no duty to bring suit against DFJ Italia (for collection of the debt or other performance which is due) before proceeding against the Guarantor. The Guarantor waives notice of the acceptance of this Guaranty and of any and all such indebtedness and liability. The Guarantor waives presentment, protest, notice, demand, or action on delinquency in respect of any such indebtedness or liability, including any right to require the Investor to sue or otherwise enforce payment thereof. Until all obligations of DFJ Italia to the Investor have been satisfied in full, the Guarantor waives all rights of subrogation to any collateral and remedies of the Investor against DFJ Italia, and other persons or entities.
- VL. AUTHORITY TO ALTER OBLIGATION. The Guarantor agrees that with notice to the Guarantor, the Investor may change the terms of payment or performance by DFJ Italia to the Investor. In this event, the Guarantor shall not be released from any responsibility on the obligations of DFJ Italia.
- ASSIGNMENT. This Guaranty (a) shall bind the successors and assigns of the Guarantor (this VII. Guaranty is not assignable by the Guarantor without the express written consent of the Investor. and is not affected by the death of the Guarantor), (b) shall inure to the Investor, its successors

EXECUTE PAGE 14

- Case Q100-by 12225 Bite. Deen 487 Bis Eller 1956 Mas the elegical School of 1955 Miss where respect to the subject middle of the Franks or conditions in any other agreement, whether oral or written. This Guaranty supersedes any prior written or oral agreements between the parties with respect to the subject matter of this Guaranty.
 - 1X. AMENDMENT. This Guaranty may be modified or amended, if the amendment is made in writing and is signed by both parties.
 - X. SEVERABILITY. If any provision of this Guaranty shall be held to be invalid or unenforceable for any reason, the remaining provisions shall continue to be valid and enforceable. If a court finds that any provision of this Guaranty is invalid or unenforceable, but that by limiting such provision it would become valid or enforceable, then such provision shall be deemed to be written, construed, and enforced as so limited.

XL	-WAIVER OF CONTRACTUAL RIGHT.	This Guaranty shall be governed by the laws of
	the State of California.	

XII. RECEDO. The Guarantor acknowledges receipt of a copy of this Guaranty.

Guarantor:

lobert Troy Caron

Investor.

Danald Benetos

ROBERT WARTON AND ASSOCIATES

ATTORNEYS AT LAW

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FINANCIAL FLAZA TOWER, 300 ESPLANADE DRIVE, SUITE 1640, ONNARD CA 93030 (803) 981-4583 FAX: (803) 981-4590

CIPTALE MANAGER LANGED, L'ARGIN

December 4, 1998

VENTURA DEFINE 1512 FLYSTHILL ROAD VENTURA CARRON TRELESTRUMES (NOS) 671-5492 FAXL: (WUS) 671-5669

ADMINISTRATOR

POSTPIR BELLINGERE, PH.S.

Mr. Donald Proctor Post Office Box 381074

MICRNET EXPRESS MAIL hun /karoniew.c.m

of cut hat. PHIL PELIMAN

RUBERT TRUT CARON

ARTGENEY

Birmingham, Alabama 35238

DFJ INVESTMENT RE:

Dear Donald:

It was nice to talk with you these past few days regarding the above-referenced matter. At the request of Mike Brown I am forwarding to you your initial investment contract with DFI, as well as the personal guarantee that we discussed.

I would appreciate your signing the investment contract where indicated, and returning the original to me in the Express Mail envelope which has been enclosed for your convenience. A copy of this contract is also enclosed for your records.

Please give me a call when you receive these documents, so that we may discuss this matter in further detail.

Thank you for your courtesy and cooperation herein, and I look forward to speaking with you soon.

Sincerely,

1-888-515-3230

ROBERT CARON AND ASSOCIATES ATTORNEYS AT LAW

Robert Troy Caron Altomey at Law

RTC:ldc Enc.

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1857 Calle Alberca, Camardio, CA 93010 (805) 383-2712 (805) 383-2715 fax http://caroniaw.com

OFFICE MANAGER LORED, CARON

April 4, 2000

ADMINISTRATOR
JOSEPH BILLINGIERE, PILD

ATTORNEYS ROBERT TROY CARON

OF COUNSEL PHIL FELDMAN Mr. Donnie Proctor
Post Office Box 381074

Birmingham, Alabama 35238

RE: DFJ ITALIA, INC.

Dear Donnie:

As you may be aware from our previous discussions, in a srunning series of developments, DFJ Italia, Inc. has closed its doors, and all investments with them appear to be in very serious jeopardy. I have retained two separate law firms to represent our interests in this matter, and had planned on filing suit against DFJ and any other responsible person by this time. However, DFJ has already been involuntarily placed into bankruptcy, and a United States Bankruptcy Court is searching for any assets of DFJ at this time. We may join this action or initiate our own litigation in the near future. I will keep you advised of any developments as we go forward.

While the company professes hope to recover the missing funds from the person it alleges embezzled them. I feel that remains very doubtful. I realize that when you made this investment, some of you may have done so partly based upon my recommendation, and for many friends and family. I even signed a Personal Guarantee on their DFJ Italia, Inc. investment. Even though myself and my family members stand to lose a very substantial amount of money at DFJ Italia, Inc., I fully intend to stand behind any guarantees that I have signed. I am now in the process of reorganizing some matters, and in the meanwhile I would like to meet with you in person to discuss your personal situation, and to mutually agree upon a solution to this apparent loss. Accordingly, I will be contacting you within the next few days to discuss this matter

Thank you for your courtesy, cooperation, and patience in this matter.

Sincerely,

ROBERT CARON AND ASSOCIATES ATTORNEYS AT LAW

Robert Troy Caron Attorney at Law

RTC:ldc

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	5/27/09 Entered 0 5/27/09 10 AL Page 28 6A52FORNIA	PROOF OF CLAIM
Name of Ceptor DFJ ITALIA, LTD.	Case Number SA 00-12295 JR	PROOF OF CLAIM
NOTE: This form should not be used to make a claim for an administrative excess. A "request" for payment of an administrative expense any he filed		
The state of the s	Hant to 11 U.S.C. exes	· P
Name of Creditor (The person or other entity to whom the debter	Check box if you are aware that	3
owes money or property):	anyone else has filed a proof of	
Martin Richards	claim relating to your claim, Attach	(**) 5 5
ame and address where notices should be sent:	copy of statement giving particulars.	
440 Angusta Ave	Check box if you have never received any notices from the bankruptcy court in this case.	
Placentia CA 92807	Check box if the address differs	2
elephone number: 562 755 2121	from the address on the envelope sent to you by the court.	THIS SPACE IS FOR COURT USE ONL
ccount or other number by which creditor identifies debtor:	Check here	
	of this claim	
Basis for Claim	damanas a previ	iousiy tiled claim, dated:
Goods sold	Retiree henefits and defin	
Services performed	Retiree benefits as defined in 11 Wages, salaries, and compensati	U.S.C. § 1114 (a)
Money loaned	Your SS #: 573 -49 - 6	Ons (Fill out below)
Personal injury/wrongful death		
Taxes	Unpaid compensation for service from	
Other	(date)	to(date)
Date debt was incurred:	10 15	
	3. If court judgment, date obta	ined:
Total Amount of Claim at Time Case Filed:	•	
If all or part of your claim is secured or entitled to priority, all	so complete Item 5 or 6 below.	
Check this box if claim includes interest or other charges in a of all interest or additional charges.	addition to the principal amount of the c	laim Attach itomizani ci-i
Secured Olain	= -	THE PROPERTY OF THE PROPERTY O
Secured Claim.		Tom. Attach itemized stateme
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Check this box if your claim is secured by collateral (including a right of setor). Brief Description of Collateral: Real Estate Motor Vehicle	6. Unsecured Priority Claim. Check this box if you have an unsecured Amount entitled to priority \$ Specify the priority of the claim: wages, salaries, or commissions (up to \$4)	priority claim
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If you hold a claim against the Debtor as of March 20, 2000, you must fill out the attached Proof of Claim form in order for the Trustee to recognize your claim. The following supplemental information request does not replace the Proof of Claim form. The following information is being requested by the Trustee to supplement the Debtor's records and bank documentation. This information will assist the Trustee in the evaluation of the accuracy and completeness of the Debtor's records and in the processing of claims. If you did not invest in investment programs of the Debtor, you do not need to complete this form.

ACCOUNT HOLDER NAI	VIE	<u></u>		<u></u>	
	Investment 1	Investment 2	Investment 3	Investment 4	Investment 5
INVESTMENT OR LOAN	<u>\$</u>				
1 Amount Invested	\$23,000	\$	\$	\$	\$
2 Date Invested					
Investment form (cash, check, wire, etc)	Check				
Payee - Who was check payable to?	Check DFJ Italia				
Source of Funds (IRA, Pension, 401K, etc)					
6 Principal repaid			,		
7 Investment Program (Finivest, Diamond, etc)					
DIVIDENDS and/or INTER	REST				
Total Dividends or Interest	received			\$	
How were the Dividends or	r interest payments	made? (check, c	ash, wire)		
Frequency of Dividends or	Interest payments	(monthly, qtrly, etc)		
Were Dividends or Interest	payments added t	o your principal rat	her than paid?		
OTHER					
DFJ sales representative				Guy Se	have !
What rate of Interest or ret	urn was promised?				<u> </u>
Did you receive DFJ Accou	unt Ledgers or state	ements?		YES (N	2)
SUPPORTING DOCUMEN	<u>nts</u>		EMIDIT_1	2PAGE_	<u>55</u>

Please attach copies of supporting documents, such as loan agreements, account ledger statements, correspondence, etc. Do not send originals. If you have previously sent your supporting documents to the Trustee, please disregard.

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Walle of Debtor	95/27/09 Entered 05/27/0	9 10 55:25 Desc ³⁰ 5204 PROOF OF CLAIM
DEU ITALIA, LTD.	Case Number SA 00-12295 JR	TOOL OF CLAIM
NOTE: This form should not be upon the little of the littl	SA 00-12295 JR	1
NOTE: This form should not be used to make a claim for an administrative case. A "request" for payment of an administrative expanse may be filled pu	expense arising after the commencement of	
Name of Creditor (The parage and the state of Creditor (The parage and	rauant to 11 U.S.C. § 503.	CA .
Name of Creditor (The person or other entity to whom the debt owes money or property):	Of Check box if you are aware tha	. 0
	anyone else nas filed a proof o	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ROBERT E. TRAVIC	claim relating to your claim. Atta	cn .
Name and address where notices should be sent:	copy of statement giving particu	uars.
203. SOUTH JUANITA AVE	Check box if you have never	2,23
REDONDO BEDCH, CA 90277	received any notices from the bankruptcy court in this case.	A 8.5
THE STATE OF THE S		
elechons sumber /7 7 7 7 7	Check box if the address differs	٠
elephone number: 562-755-2120	from the address on the envelop	
count or other number by which creditor identifies debtor:	sent to you by the court.	THIS SPACE IS FOR COURT USE (
10000514	Chack here replaces	\
10000014	if this claim	2 Ofman
Basis for Claim		a previously filed claim, dated:
Goods sold	Retires honosis	
Services performed	Retiree benefits as defined	in 11 U.S.C. § 1114 (a)
Money loaned	mages, salaries, and compe	nsations (Fill out below)
Personal injury/wrongful death	Your SS #:	-
Taxes	Unpaid compensation for ser	rvices performed
Other	from	to
	(date)	(date)
Date debt was incurred:		•
F 1 (1 f 3f D		
4/6/99	3. If court judgment, date of	obtained:
Total Amount of Claim at Time One 511	3. If court judgment, date of	obtained:
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Case 8:00-bk-12295-RK Doc 487-3 Filed 05/27/09 Entered 05/27/09 10:55:25 Desc Exhibitation and Reducest

If you hold a claim against the Debtor as of March 20, 2000, you must fill out the attached Proof of Claim form in order for the Trustee to recognize your claim. The following supplemental information request does not replace the Proof of Claim form. The following information is being requested by the Trustee to supplement the Debtor's records and bank documentation. This information will assist the Trustee in the evaluation of the accuracy and completeness of the Debtor's records and in the processing of claims. If you did not invest in investment programs of the Debtor, you do not need to complete this form.

-	ACCOUNT HOLDER NAM	1E			-	
		Investment 1	Investment 2	Investment 3	Investment 4	Investment 5
Ī	NVESTMENT OR LOANS	<u>.</u>				
1	Amount Invested	\$20,000	\$23,339 59	\$18,158 96	s	\$
2	Date Invested	416199	4/24/99	7/30/99	 	
3	Investment form (cash, check, wire, etc)	CHECK.	Chica	cure		
4	Payee - Who was check payable to?	K-COMM, IN	DFJ,	DET		
5	Source of Funds (IRA, Pension, 401K, etc)	1 1 1 2	ELA	40114		
6	Principal repaid	0	-0	÷		
7	Investment Program (Finivest, Diamond, etc)	FINIVOT	GNIVEST	AN1 VC3-		<u> </u>
D	IVIDENDS and/or INTER	<u>EST</u>				
	Total Dividends or Interest r	eceived		•	\$ 4674	
	How were the Dividends or	Interest payments	made? (check, ca	ash, wire)	CASH.	
	Frequency of Dividends or I	nterest payments (monthly, qtrly, etc)		MONTHL	ч
	Were Dividends or Interest p	payments added to	your principal rath	er than paid?	No	
<u>0</u>	THER			•		
	DFJ sales representative	:			Mu Scap	0ELL (
	What rate of Interest or retur	n was promised?		-	24	%
	Did you receive DFJ Accour	nt Ledgers or state	ments?	•	YES NO	
<u>S</u>	UPPORTING DOCUMEN	<u>rs</u>		EAUDIT	13 PAGE	57

Please attach copies of supporting documents, such as loan agreements, account ledger statements, correspondence, etc.

Do not send originals. If you have previously sent your supporting documents to the Trustee, please disregard.

Finivest Bridge Funding Investment/Loan Agreement

the "Managing Director" hereinafter referred to as "MD," of the Finivest Bridge Fund, and, the "Bridge Associate," hereinafter referred to as "BA," agree:	
That "MD" solely owns and controls one hundred percent of all outstanding shares in the Finivest Brund; and	idge
That "BA" acknowledges and ratifies that he/she, by way of its investment, holds no shares, stocks, partnership shares (general or limited) in neither DFJ, Finivest, LTD, Finivest Bridge Fund, nor any otheir subsidiaries.	of
ALSO, the "BA" shall have no right at any time to audit the books and records of the "MD," its subsidiaries, holding, officers and employees; nor shall the "BA," his/her agent(s), representative(s) hany voice in the day-to-day operations of either Finivest Bridge Fund, or the "MD."	ave
Robert & Travis 's Sole Relationship to the FUND and the "MD" is best described as a Bridge Fund Depositor, or Bridge Associate.	ì
Shall be admitted as a Depositor upon the terms and conditions set for herein:	th
The "BA" shall place on deposit with the Managing Director, DFJ, the sum of 31339,59 \$US for period of eighteen months, during which the "BA" agrees not to withdraw any portion of the principle Upon completion of the initial term of the investment/loan agreement, it shall be automatically renewed a guaranteed 24% annual interest rate for another eighteen-month period unless the "BA" notifies the "MD" in writing that he/she desires to terminate his/her investment/loan agreement.) .
Except for the initial eighteen-month period, the "BA" may choose to terminate, in writing, his/her contract at any time for any reason. Upon receipt of written notifications of termination of his/her investment/loan agreement, the "MD" shall deliver to the "BA" his/her principle deposit plus accrued interest within 14 days of said notice.	

Upon Death, incapacity, or legal disability of the "BA," the "MD" shall contact said beneficiary and offer the option of returning said principle and accrued interest within 14 days or leaving said contract in place and allow the beneficiary to assume said contract and receive all interest payments from that day forward.

If the "BA" chooses to terminate the contract prior to the initial 18 month agreement, the "MD" shall

deliver the principle investment minus all interest paid to "BA" within 14 days of said notice.

The "MD" shall pay a guaranteed annual interest rate of 24% on the principal deposit.

Interest payments on the principal deposit shall be paid monthly at the rate of 2% per month based on the initial investment deposit amount in \$US.

The "BA" understands that Finivest Bridge Fund is a DFJ offshore investment vehicle and is not responsible to report to the United States Government any earnings, dividends or interest payments made to its Investment/Loan Depositors (BA).

It is the Depositors responsibility to report all earnings to the United States Government and pay the appropriate taxes.

The "BA" agrees to indemnify and hold harmless the Finivest Bridge Fund, DFJ, its subsidiaries, holding, officers and employees in the event of any legal action taken by the United States Government and its agencies for nonpayment of taxes. Finivest Bridge Fund Bank is backed and guaranteed by DFJ Italia, LTD.

I would like	e my monthly interest payments in the form of (select one):
Make chec	Check Wire Transfer into my personal account Direct deposit to offshore account Roll Over CASh ks payable to DFJ
Depositor name and	address:
Name	MODERTE TONIS
Street Address	203 South JUANITA QUE
City/State/Zip code	Ardendo Brach, CA GOOM
Telephone	(114) 299-3679
E-Mail/Fax	0.70.7
DOB:	Soc. Sec. # Drivers Lic. # nd address:
Name	REDUCEA PA TrAVIS (SISTER)
Street Address	19009 Ser Richard St.
City/State/Zip code	19099 Ser Richno St. Fountain Mily, CA 92908
Telephone	114 913-6349
E-Mail/Fax	
DOB:	Soc. Sec. # Drivers Lic. #
Name	Guy F. Scarpelli
Street Address	18881 Von Karman Ave. Suite 220
City/State/Zip code	Irvine, CA. 92612
Telephone	949-955-2490 x 206
E-Mail/Fax	<u>Guy@DFJItalia.com /</u> 949-955-2497
Agreed to and signed	this day: Pul 8,1999 Representative: Guy P. Scarpelli
/	18881 Von Karman Ave. Suite 220

Irvine, CA. 92612 949-955-2490 Ext. 206 151 FARMINGTON PAYE ibit Exhibit 10-14 Page 35 of 52 HARTFORD CT 05156-1277

Desc. 0000206912

Page 1 of 1

Check Date:

May 03, 1999

000038

DFJ ITALIA FBO ROBERT E TRAVIS ATTN GUY F SCARPELLI 18881 VON KARMAN AVE STE220 IRVINE CA 92612-1500

A410708

VF8723/7556033338723QM

FULL SURRENDER 05/03/99 DFJ ITALIA 560-33-3316

GROSS AMOUNT	24,207.10
MVA ADJUSTMENT	.00+
ADJ. GROSS AMOUNT	24,207.10
MAINTENANCE FEE	30.00
SURRENDER FEE	837.51
LOAN OUTSTANDING	.00
FEDERAL INCOME TAX	.00
STATE INCOME TAX	.00
MUNICIPAL INCOME TAX	.00
NET CHECK AMOUNT	23,339.59
TRANSF SSN # 560333316	•

DIRECT INQUIRIES AND ADDRESS CHANGES TO AETNA LIFE INSURANCE AND ANNUITY CO CUSTOMER SERVICE 151 FARMINGTON AVE HARTFORD, CT 06156-1277 1-800-531-4547

LAETNA DE INSURANCE AND ANNUME COMMISSION OF THE STREET OF

7666038338723CNV/A410708/48360

Twenty three thousand three hundred thirty nine and 59/100 Dollars.

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Finivest Bridge Funding Investment/Loan Agreement

DFJ the "Managing Director" hereinafter referred to as "MD," of the Finivest Bridge Fund, and, the "Bridge Associate," hereinafter referred to as "BA," agree:
That "MD" solely owns and controls one hundred percent of all outstanding shares in the Finivest Bridge Fund; and
That "BA" acknowledges and ratifies that he/she, by way of its investment, holds no shares, stocks, partnership shares (general or limited) in neither DFJ, Finivest, LTD, Finivest Bridge Fund, nor any of their subsidiaries.
ALSO, the "BA" shall have no right at any time to audit the books and records of the "MD," its subsidiaries, holding, officers and employees; nor shall the "BA," his/her agent(s), representative(s) have any voice in the day-to-day operations of either Finivest Bridge Fund, or the "MD."
Bridge Fund Depositor, or Bridge Associate.
Mobile E Thatis shall be admitted as a Depositor upon the terms and conditions set forth herein:
The "BA" shall place on deposit with the Managing Director, DFJ, the sum of
Except for the initial eighteen-month period, the "BA" may choose to terminate, in writing, his/her contract at any time for any reason. Upon receipt of written notifications of termination of his/her investment/loan agreement, the "MD" shall deliver to the "BA" his/her principle deposit plus accrued interest within 14 days of said notice.
If the "BA" chooses to terminate the contract prior to the initial 18 month agreement, the "MD" shall deliver the principle investment minus all interest paid to "BA" within 14 days of said notice.

The "MD" shall pay a guaranteed annual interest rate of 24% on the principal deposit.

Interest payments on the principal deposit shall be paid monthly at the rate of 2% per month based on the initial investment deposit amount in \$US.

Upon Death, incapacity, or legal disability of the "BA," the "MD" shall contact said beneficiary and offer the option of returning said principle and accrued interest within 14 days or leaving said contract in place and allow the beneficiary to assume said contract and receive all interest payments from that day forward.

The "BA" understands that Finivest Bridge Fund is a DFJ offshore investment vehicle and is not responsible to report to the United States Government any earnings, dividends or interest payments made to its Investment/Loan Depositors (BA).

EXHIDIT 13	PAGE LL	<u>e </u>
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It is the Depositors responsibility to report all earnings to the United States Government and pay the appropriate taxes.

The "BA" agrees to indemnify and hold harmless the Finivest Bridge Fund, DFJ, its subsidiaries, holding, officers and employees in the event of any legal action taken by the United States Government and its agencies for nonpayment of taxes. Finivest Bridge Fund Bank is backed and guaranteed by DFJ Italia, LTD.

I would like my monthly interest payments in the form of (select one):

)Z	Check
JZ(Checl

- Wire Transfer into my personal account
- Direct deposit to offshore account
- □ Roll Over

D	epositoi	name	and	add	ress
---	----------	------	-----	-----	------

Make chec	ks payable to DFJ Levident preprints frais on Sept. 1st 1. at 363.00 permonth
Depositor name and	l address:
Name	Mobile Tonis
Street Address	203 South Junita Auc
City/State/Zip code	Reducto Beach, CA 90211
Telephone	(714) 299-3679
E-Mail/Fax	
OOB:	Soc. Sec. # Drivers Lic. #
Beneficiary name a	
Name	Repair A TONY (SISTED)
Street Address	
City/State/Zip code	
Telephone	
E-Mail/Fax	
	Soc. Sec. # Drivers Lic. #
OFJ Representative:	
Name	Guy F. Scarpelli
Street Address	18881 Von Karman Ave. Suite 220
City/State/Zip code	Irvine, CA. 92612
Telephone	949-955-2490 x 206
E-Mail/Fax	Guy@DFJItalia.com / 949-955-2497
Agreed to and signed	d this day: 7/30/97 Representative:

18881 Von Karman Ave. Suite 220

Irvine, CA. 92612

949-955-2490 Ext. 206

3 PAGE 162

AUTHORIZED SIGNATURE

NET AMOUNT

10037509

Doc 487-3 Acited คือ 22 doer Entered 05/27/09 10:55:25 Exhibit Exhibit 10-14 Page 39 of 52 Case 8:00-bk-12295-RK

Account Number 10000514

SSN/Tax ID

Statement Date: 05/08/99

Page 1

Account Holder Travis, Robert E.

Address

203 South Juanita Ave.

Redondo Beach, CA 90277

US

Phone

(714) 299-3679

Account Type Finivest

Account Rep Guy F. Scarpelli

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-19988	04/06/99	±	Initial Deposit		20,000.00
DFJ-22292	04/28/99	002	Deposit		23,339.59
			Total Activi	ty 0.00	43,339.59

Ending Balance \$43,339.59 Case 8:00-bk-12295-RK Doc 487-3 Aciled 05/27/09 10:55:25 Exhibit Exhibit 10-14 Page 40 of 52

Account Number 10000514

SSN/Tax ID

Statement Date: 08/04/99

Page 1

Account Holder Travis, Robert E.

Address

203 South Juanita Ave.

Redondo Beach, CA 90277

US

Phone

(714) 299-3679

Account Type Finivest

Account Rep Guy F. Scarpelli

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-19988	04/06/99	*	Initial Deposit		20,000.00
DFJ-22292	04/28/99	002	Deposit		23,339.59
DFJ-22737	05/15/99	001	Dividend Earnings		400.00
DFJ-22738	05/15/99	004	Dividend Payout	400.00	· · · · · · · · · · · · · · · · · · ·
DFJ-23861	06/15/99	001	Dividend Earnings		866.79
DFJ-23862	06/15/99	004	Dividend Payout	866.79	
DFJ-25013	07/15/99	001	Dividend Earnings		866.79
DFJ-25014	07/15/99	004	Dividend Payout	866.79	
DFJ-25227	07/30/99	002	Deposit		18,158.96
1		•	Total Activity	2,133.58	63,632,13



SSN/Tax ID

01/20/00

Page

Account Address

Phone

Travis, Robert E.

4

203 South Juanita Ave.

Redondo Beach, CA 90277

US

Statement Period:

From 12/16/99

Thru 01/15/00

Account Type 001

(714) 299-3679

Account Rep 003

Beginning Balance

1

\$61,498.55

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-3172	01/15/00	001	Dividend Earnings		1,229.97
DFJ-3172	01/15/00	004	Dividend Payout	1,229.97	
			Total Activity	1,229.97	1,229.97



SSN/Tax ID

02/17/00

Page

Account

Travis, Robert E.

Address

203 South Juanita Ave.

Redondo Beach, CA 90277

US

Statement Period:

From 01/16/00

Thru 02/15/00

Account Type 001

Phone

(714) 299-3679

Account Rep 003

Beginning Balance

1

\$61,498.55

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-3281	02/15/00	001	Dividend Earnings		1,229.97
DFJ-3281	02/15/00	004	Dividend Payout	1,229.97	
			Total Activity	1,229.97	1,229.97

SSN/Tax ID

04/16/99

Page

Account

Travis, Robert E.

Address

Phone

203 South Juanita Ave.

Redondo Beach, CA 90277

US

Statement Period:

From 03/16/99

Thru 04/15/99

Account Type 001

(714) 299-3679

Account Rep 003

Beginning Balance

1

\$0.00

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-1998	04/06/99	*	Initial Deposit		20,000.00
			Total Activity	0.00	20,000.00

Ending Balance \$20,000.00

CRH 5984

BOBTRAVIS CO. \$10,000 -GLENDALE FEDERAL BONK # 0147070508

CRY NEWS CH

CMC, INC. \$10,000-

WELLS PARCO BANK ACCTE 0495- 239550

SSN/Tax ID

05/16/99

Account

Travis, Robert E.

Address

Phone

203 South Juanita Ave.

Redondo Beach, CA 90277

US

Page

Statement Period:

From 04/16/99

Thru 05/15/99

Account Type 001

(714) 299-3679

Account Rep 003

Beginning Balance

1

\$20,000.00

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-2229	04/28/99	002	Deposit		23,339.59
DFJ-2273	05/15/99	001	Dividend Earnings		400.00
DFJ-2273	05/15/99	004	Dividend Payout	400.00	
			Total Activity	400,00	23,739.59

Ending Balance \$43,339.59

Exhibit E hibit 10-14 Page 45 of 52

Account Num 10000514

SSN/Tax ID

10/17/99

Page

Account

Travis, Robert E.

Address

Phone

203 South Juanita Ave.

Redondo Beach, CA 90277

US

Statement Period: From 09/16/99

Thru 10/15/99

Account Type 001

(714) 299-3679

Account Rep 003

Beginning Balance

1

\$61,498.55

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-2821	10/15/99	001	Dividend Earnings		1,229.97
DFJ-2821	10/15/99	004	Dividend Payout	1,229.97	
			Total Activity	1,229.97	1,229.97

Ex. Ibit Exhibit 10-14 Page 46 of 52

Account Num 10000514

SSN/Tax ID

11/17/99

Page

Account

Travis, Robert E.

Address

Phone

203 South Juanita Ave.

Redondo Beach, CA 90277

US

Statement Period: From 10/16/99

Thru 11/15/99

(714) 299-3679

Account Type 001

Account Rep 003

Beginning Balance

1

\$61,498.55

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-2934	11/15/99	001	Dividend Earnings		1,229.97
DFJ-2935	11/15/99	004	Dividend Payout	1,229.97	
			Total Activity	1,229.97	1,229.97



SSN/Tax ID

12/17/99

Page

Account

Travis, Robert E.

Address

203 South Juanita Ave.

Redondo Beach, CA 90277

US

Statement Period:

From 11/16/99

Thru 12/15/99

Account Type 001

Phone

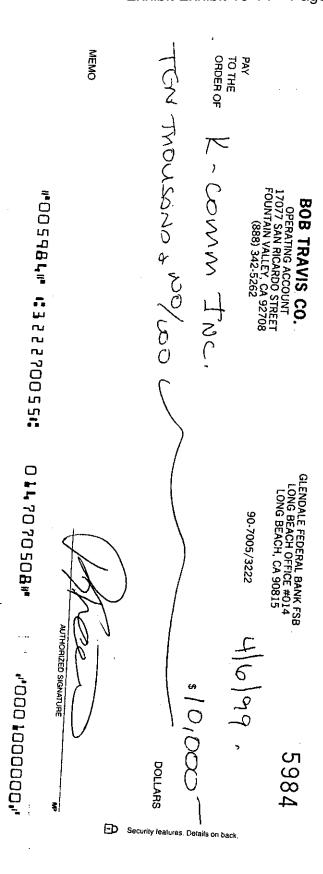
(714) 299-3679

Account Rep 003

Beginning Balance

\$61,498.55

Reference Code	Date	Category	Transaction Description	Debits	Credits
DFJ-3047	12/15/99	001	Dividend Earnings		1,229.97
DFJ-3047	12/15/99	004	Dividend Payout	1,229.97	,
			Total Activity	1,229.97	1,229.97



For Depos, 7 Only K-Con 0455755470

2122 13579

English Same

20112107 LA PROCESSED OP 04/21/99 122000247 40199 MT. 80 Case 8:00-bk-12295-RK Doc 487-3 Filed 05/27/09 Entered 05/27/09 10:55:25 Desc Exhibit Exhibit 10-14 Page 50 of 52

UNITED CTATES BANKRUPTCY CO. DOC-487-3 CT	TENTO DIO 7/00 - Francia DE 107/00 40-Francia
Que - 0-0-0 - 0-1-1 - 0-0-10 - 0-1-1-1	TEd 05/27/09 (Entered 05/27/09 10:55:25 of CLAIM
	t 10-14ss Page 51 of 52 SA 00-12295 JR
NOTE: This form should not be used to make a claim for an addinistrative case. A request for payment of an administrative expense may be stored.	6 6XD603-6 AURIOG 9 three to be a second
The state of the s	oursuant to 11 U.S.C. § 503.
Yame of Creditor (The person or other entity to whom the doc	otor Check box if you are aware that anyone eise has filed a groot of ERR II
I a wide a morrie a or budger (A):	anyone else has filed a proof of
LEON F. BRADY OR	Claim relating to your claim, Attach
Name and address where notices should be sent:	copy of statement giving particulars
LEON F. BANDY JA.	Check box if you have never 5Y:
	pankruptcy court in this case.
RO BUX391	
SEMMES, AL 36575 Telephone number	Check box if the address differs
lejephone number	from the address on the envelope sent to you by the court. THIS SPACE IS FOR COURT LISE DNG!
Account or other number by which creditor identifies debtor:	22 27 C 2001
amount of cartor identifies deb(of:	Check here replaces
	if this claim amends a previously filed claim, dated
1. Basis for Claim	
Goods sold	Retiree benefits as defined in 11 U.S.C. § 1114 (a)
Services performed	wages, salaries, and compensations (Fill out below)
Money loaned	Your SS #: 423 - 50 - 4605
Personal injury/wrongful death	Unpaid compensation for services performed
Taxes	from .
Other	(date) (date)
. Date debt was incurred:	(uate)
. Date debt was incurred:	3. If court judgment, date obtained:
. Total Amount of Claim at Time Case Filed:	
If all or part of your claim is secured or entitled to princity	\$ 75,000
——I check this dox it claim includes interest or other charges	and addition to the principal amount of the claim. Attach itemized statemen
	Attach itemized statemen
Secured Claim.	6. Unsecured Priority Claim.
Check this box if your claim is secured by collateral (including a right	Check this box if you have an unsecured growty claim
of selon)	Amount entitled to priority \$ 75.000
Brief Description of Caliateral	Specify the priority of the claim: CASH COMEST TO DES
Real Estate Motor Vehicle	Wages, salaties, or commissions (up to \$4,300) € earned within 90 days nation
Other	tiling of the bankruptcy petition or dessation of the deptor's pusiness, which ever is earlier - 11 U.S.C. § 507(a)(3)
	Contributions to an employee benefit plan - 11 U.S.C. & 507(a)(4)
Value of Corlateral: \$	Up to \$1,950= of deposits toward purchase, lease, or reptal of property or
	Services for personal, family, or nousehold use - 11 U.S.C. § 507(a)(6). Alimony, maintenance, or support owed to a spouse, former spouse, or child.
unt of arrearage and other charges at time case filed included in	11 0.3.C. # 507(a)(7),
ured claim, if any \$	Taxes or penalties owed to governmental units - 11 U.S.C. § 507 (a)(8)
	Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (
Coodia	1
Credits: The amount of all payments on this claim has be	en credited and deducted for THIS SPACE IS FOR COURT USE ONLY
The perpose of making this proof of claim.	
Supporting Documents: Attach copies of supporting documents of supporting documents.	cuments, such as promissory
notes, parchase orders, invoices, itemized statements of rui	Uning accounts contracts
COURT HIDDINGS mortgages and a	
 court judgments, mortgages, security agreements, and evide 	ance or perfection of lien.
DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not	available
DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not explain. If the documents are voluminous, attach a summary	available,
Do NOT SEND ORIGINAL DOCUMENTS. If the documents are not explain. If the documents are voluminous, attach a summary. Date-Stamped Copy: To receive an acknowledgment of	available,
DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not explain. If the documents are voluminous, attach a summary. Date-Stamped Copy: To receive an acknowledgment of enciose a stamped, self-addressed envelope and copy of this	f the filing of your claim, is proof of claim.
DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not explain. If the documents are voluminous, attach a summary. Date-Stamped Copy: To receive an acknowledgment of enclose a stamped, self-addressed envelope and copy of this sign and print the name and title, if any, of the creditors	f the filing of your claim, is proof of claim.
DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not explain. If the documents are voluminous, attach a summary. Date-Stamped Copy: To receive an acknowledgment of enclose a stamped, self-addressed envelope and copy of this sign and print the name and title, if any, of the creditor of this claim (attach, copy of power or attorney, if any).	f the filing of your claim, is proof of claim. or other person authorized to file
DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not explain. If the documents are voluminous, attach a summary. Date-Stamped Copy: To receive an acknowledgment of enclose a stamped, self-addressed envelope and copy of this sign and print the name and title, if any, of the creditor of this claim (attach, copy of power of attorney, if any).	f the filling of your claim, is proof of claim. or other person authorized to file
DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not explain. If the documents are voluminous, attach a summary. Date-Stamped Copy: To receive an acknowledgment of enclose a stamped, self-addressed envelope and copy of this sign and print the name and title, if any, of the creditor of this claim (attach, copy of power of attorney, if any).	f the filing of your claim, is proof of claim. or other person authorized to file
DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not explain. If the documents are voluminous, attach a summary. Date-Stamped Copy: To receive an acknowledgment of enclose a stamped, self-addressed envelope and copy of this sign and print the name and title, if any, of the creditor of this claim (attach, copy of power of attorney, if any).	f the filling of your claim, is proof of claim. or other person authorized to file

AND ASSOCIATES

ATTORNEYS AT LAW

1857 Calle Alberca, Camarillo, California 93010 (805) 383-2712

(805) 383-2715 fax

OFFICE MANAGER LORED, CARON

ADMINISTRATOR JOSEPH BILLINGIERE, PH.D.

ATTORNEY ROBERT TROY CARON December 8, 2000

OF COUNSEL PHIL FELDMAN

> Mr. Leon Brady Post Office Box 391 Semmes, Alabama 36575

RE: **DFJ ITALIA**

Dear Leon:

Thank you for the messages which you have left requesting that we forward to you copies of your investment contracts, etc., with DFJ Italia. I have been tied up with the Vargas v. Trinidad fight for the past couple of weeks, and apologize for not getting right back to you.

Please note that your investment contracts and any file documents were held by DFJ Italia, and I am not in possession of any copies. However, I believe that the information which you are seeking can be provided by our accounting records.

Our records reflect that you invested \$50,000.00 with DFJ Italia on or about March 16, 1999, and were paid \$1,000.00 per month on that investment from May 1, 1999 until March 1, 2000, for a total of \$11,000.00. You made an additional investment of \$25,000.00 on or about September 1999, and were paid \$500.00 per month for that investment from November 1, 1999 until March 1, 2000, for a total of \$2,500.00

Thank you for your courtesy and cooperation herein. Should you have any questions, or wish to further discuss this matter, please do not hesitate to call.

Sincerely,

ROBERT CARON AND ASSOCIATES

ATTORNEYS AT LAW

Robert Troy Caron Attorney at Law

RTC:ldc